

INFORMATIONAL LETTER NO. 2159-MC-FFS

DATE: September 2, 2020

TO: All Iowa Medicaid Providers

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Governor's Disaster Proclamation for August 10, 2020 Derecho

EFFECTIVE: Immediately

The Medicaid flexibilities the Department currently has in place due to the COVID-19 public health emergency also apply to providers and members affected by the August 10, 2020 derecho that moved across the state and caused widespread damage.

These flexibilities include:

- Extending prior authorizations (PAs) that expired during the weather-related emergency for an additional 30 days from the date of the expiration of authorizations that were approved. Authorizations will discontinue being extended on August 31, 2020. Authorizations extensions will be consistent with the number of units relative to the originally approved authorization. This applies to both MC and FFS. Providers assisting members should contact the appropriate PA Help Desk if an extension is necessary.
 - For outpatient medical authorizations, MCOs will be automatically updating authorizations extensions and those updates are currently in process. If a member does experience a change in medical needs, providers should call in for authorizations.
 - For inpatient medical authorizations, MCOs will extend authorizations for an additional 72 hours from the end date on the authorization. If additional clinical information is not obtained, the MCO reserves the right to review these cases for medical necessity retrospectively.
 - For LTSS, case managers will be working with members and providers to determine the need for extensions.

- Allowing members to obtain additional medication through an early refill of their prescription, or allowing up to a 90 days' supply for all medications, based on the clinical prescriber's judgement. Refer to additional information in [IL 2119-MC-FFS-CVD](#)¹.
- The existing flexibilities around expanded telehealth services statewide as outlined during the COVID pandemic also continue to apply. Providers may utilize technology to facilitate appropriate care reimbursable within the Medicaid program.
- To be consistent with the timely filing allowances during COVID, the claims filing extension for MC. Effective with dates of service beginning August 1, 2020, providers will have an additional 90 calendar days to submit first time medical claims and encounters for MC claims. Specifically, providers must submit first time medical claims and encounters within 270 calendar days of service. There is currently no change to the claims filing deadline of 365 days from the date of service for dental and FFS claims.

Additional information on the Department's current expanded Medicaid services can be found on the [DHS website](#)².

Questions? Contact your respective MCO, or the Department for FFS, below.

IME Provider Services for FFS members:

- Provider email: imeproviderservices@dhs.state.ia.us.
- Provider Services: 1-800-338-7909

Managed Care Organizations:

- Amerigroup Iowa Provider Services: 1-800-454-3730
- Iowa Total Care Provider Services: 1-833-404-1061
- Delta Dental of Iowa (DDIA): 1-800-472-1205
- Managed Care of North America (MCNA): 1-855-856-6262

¹ https://dhs.iowa.gov/sites/default/files/2119-MC-FFS-CVD_Telehealth_and_Pharmacy_Billing_COVID19_2.pdf?090120201948

² <https://dhs.iowa.gov/ime/providers/claims-and-billing/covid19>